

Nevada Office of HIV/AIDS

Ryan White HIV/AIDS Program

ADAP Cost Effectiveness Worksheet Instructions

The ADAP Cost Effectiveness Worksheet Form is a dynamic Excel Spreadsheet that will assist the Eligibility & Enrollment Providers in determining if a Ryan White Part B client is eligible for Insurance Assistance or ADAP Medication Assistance.

The shaded blue cells are the only ones that can be edited in the spreadsheet. All of the remaining cells are formula driven.

- In Step 1, the Eligibility & Enrollment Provider will select from the drop down menu, the name of the **ADAP Formulary Medications** that the client has been prescribed. The **Cost of the Medications** will automatically populate in the second column. The total medication cost will be added together in the **Medication Cost Per Year** box.
- In Step 2, the **HICP Share of Premium** will be calculated from the **Annual Insurance Premium** minus the **Annual Premium Subsidy**.
- In Step 3, the **HICP Share of Copayment** is calculated from determining the **Annual Out of Pocket Maximum** minus the **Federal Cost Sharing Reduction**. This will give the true out of pocket maximum for the client.
- In Step 4, the **Total Medication Cost** is compared with the **HICP Insurance Cost** and a cost effectiveness determination is made.

If the client does not have insurance or does not have insurance options at the Eligibility & Enrollment Appointment, then the Eligibility & Enrollment Provider may work with the HICP Provider or other qualified Insurance Navigators to assist the client in finding insurance options that would be cost effective.

If the plan is not cost effective, then the Eligibility & Enrollment Provider will need to work with the client to find a more cost effective insurance option.

If the plan is cost effective, then the HICP Provider will be able to process the premium payment and the Pharmacy Benefit Manager will be able to cover the medication co-pays. The Eligibility & Enrollment Provider will attach the Worksheet to the insurance documentation from either the client's employer, spouse's employer, or Nevada Health Link. Client is instructed to bring in invoices to any Eligibility & Enrollment provider or Outreach provider for scanning and referral into CAREWare so that the HICP provider will be able make the insurance payment.